# THE LEVENSHULME URBAN DISTRICT COUNCIL.

## REPORT

OF

# The Medical Officer of health

FOR

1909.

MANCHESTER:

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### REPORT OF THE MEDICAL OFFICER OF HEALTH

#### FOR THE

### LEVENSHULME URBAN DISTRICT COUNCIL

#### FOR 1909;

Including Statistics from Incorporation (Nov. 9th) to end of the year.

The Chairman and Members of the Council.

Gentlemen, —I have the honour to present for your consideration my twentyfifth and last Annual Report on the health and sanitary condition of your District of Levenshulme during the past year 1909.

Owing to amalgamation with the City of Manchester Levenshulme ceased to exist as a separate district on November 9th, but by arrangement 1 am able to give the statistics and figures for the whole of the year.

The report is of a favourable character, as it records again a low death-rate, a very low infantile mortality, a moderate occurrence of infections disease and a very low zymotic death-rate, and a continuous and steady advancement of the sanitary conditions of the district.

During the past year the rate of growth of the district has become more rapid. 233 new houses were certified by the Surveyor as fit for habitation—in North-west Ward, 30; South-west Ward, 26; North-east Ward, 157; and South-east Ward, 20.

The distribution of inhabited houses was reported to me by the Assistant Overseer at the end of the year, as: North-west Ward, 569; South-west Ward, 913; North-east Ward, 2,273; and South-east Ward, 900; making a total of 4,655 houses occupied, an increase of 273 over the number at the end of 1908.

The area of the district is 606 acres, 7 of which is inland water, and the areas of the separate wards are, approximately, in acres: North-west, 76; South-west, 112; north-east, 228; and south-east, 190. North-west and South-west Wards are now almost completely occupied by buildings; the other two wards

still contain a large area of land unoccupied. The district will in the future be divided into two wards, North and South, which will be in area and population respectively a little smaller than the present Northern, and a little larger than the present Southern Wards conjoined.

The whole of the district is situated on a thick bed of the boulder clay overlying the lower Permian sandstone. On the surface is a layer of alluvium, varying from 4 to 12 inches in thickness. The land is fairly level but undulating between the streams, with a slight fall from east to west and from south to north, and though the nature of the clay does not allow the percolation of the rainfall, the natural slopes of the ground drain it readily into the streams to a very great extent, a fact which has largely influenced the method of dealing with top or surface water in the district.

There are three brooks in the district, running from east to west. Nico Brook, or Ditch, which forms our boundary on the north, is now culverted over for a third of its length at its western end. Levenshulme Brook, which runs through the middle of the district, is formed by three tributaries: one from the Printworks reservoirs is open; the central branch, along Barlow Road, is almost completely culverted; the third, from Reddish, past the Mercer Works, is half covered; beyond the junction near the Library the brook is completely covered.

Black Brook, which in its western half is called Cringle Brook, forms the southern boundary. It is open throughout its whole length.

These streams receive the drainage from the land, and also the surface water from the streets, yards, and roofs. They are not otherwise polluted with sewage matter, and very slightly with manufacturers' refuse.

In a report submitted by the Surveyor on the pumps and wells in the district in existence and that originally existed he gives a list of 25 pumps; 16 of these are filled in, 6 boarded or flagged over, and 3 still in use.

At the commencement of the year I made a provisional estimate of the population at the middle of the year at 19,000. Owing to the more rapid building and occupation of the houses I find that this is too low, and that the correct number is about 19,600, and it is on this figure that all the rates given in the report are based. Taking the number of occupied houses, and the census average of 4·29 persons per house, there would be at the end of the year almost exactly 20,000 persons living in the district.

The distribution of the population in the various wards and their special rates are shown in Tables III, and IV.

The increasing rate of growth of the district is indicated by the ceusus returns of the population: 1871, 2.742; 1881, 3.557; 1891, 5.506; 1901, 11.185. In 1901 there were 2.675 tenements, 609 with less than 5 rooms. In such rapidly growing suburban districts as ours it is very difficult to frame accurate estimates, and a quinquential ceusus is absolutely necessary to allow the various statistics any real approach to accuracy.

The character of the houses and of the residents varies to a certain extent in the different wards. In North-east and South-east Wards the rents of the houses are mainly from 4s, 6d, to 9s, per week, and the population is composed of labourers, artizans, and the lower grades of clerks and warehousemen. In these two wards almost all the few large factories are situated. In South-west Ward the rents range chiefly from 7s, 6d, to 12s, per week, with a few larger houses: and in North-west Ward from £20 to £40 per annum. In these two wards the residents are chiefly clerks and warehousemen of a higher grade.

As in previous reports, all the tables are incorporated in the part of the report in which they are considered, and not given separately at the end.

During the year 483 births were registered—males 259, females 224—which is equivalent to a birth-rate of 24·13 per thousand of the population. This is lower than that of last year (25·59), and much below the average for the past 10 years (28·14), and is in fact with one exception the lowest recorded for the district. From 1879 to 1888 the average rate was 33·86, and from 1889 to 1898, 26·83 per thousand. The excess of births over deaths, or the natural increase, was 289; 10 were illegitimate.

One hundred and seventy-two deaths occurred in the district, which is equivalent to a death-rate of 8.77 per thousand of the population. This is absolutely the lowest death-rate recorded in the district. Last year it was 9.24, and the average for the past 10 years is 10.56.

To obtain a correct estimate, however, it is necessary to include 22 deaths of residents occurring outside the district in the following institutions:—Withington Union Hospital, 7; Manchester Royal Infirmary, 10; Baguley Sanatorium, 1; other Manchester hospitals, 2; Northwich, 1; Stockport, 1. This number is less than last year; it constitutes 11 per cent, of the total deaths belonging to the district, which in all amounted to 194, and the actual or corrected death-rate is 9.89 per thousand. Of these deaths 102 were males, 92 females. This is below the average (11.48) of the past 10 years, and is the lowest corrected death-rate recorded except one. The rates for the four quarters of the year were 11.15, 10.50, 8.42, and 10.73. Only one death of an illegitimate child under one year of age was recorded.

In the following table are given the chief vital statistics for England and Wales, some adjacent districts, and ours:—

Table I.

Comparative Vital Statistics.

AREA.	Population estimated to middle of 1909,	Birth-rate,	Death rate	Zymotic Death rate	Infantile Mortality
England and Wales	35,756,615	25.6	14.5	I·12	109
Rural England and Wales.	14,202,695	25.6	13.6	0.80	98
76 Great Towns	16,445,281	25.7	15.6	1.42	118
143 Smaller Towns	5,108,639	24.8	14.5	1.08	III
Manchester	654,584	27.52	17.7	1.76	136
Stockport	103.706	26.33	17.96	1.73	134
Stretford	43,850	18.4	12.0	1.07	134
Withington	47,064	10.7	10.7	0.45	77
Gorton	41,000	29.5	15:4	1.7	132
Heaton Norris	12,173	13.8	9.9	0.32	82
Levenshulme	19,600	24.13	9.89	0.32	70

This shows that our district compares very favourably in every respect with the other districts.

The next table gives the vital statistics of the district for the past 32 years, so far as they are available. It shows the steady and continuous increase in the population, more rapid in the later years: the variations in the birth-rate, high in the earlier period lower in the last few years; and the variations in the infantile mortality which have been marked in alternate years, due mainly to the prevalence or absence of Diarrhæa and Measles; during the last eight years it has been at the low average rate of 92.

Table II.

VIIAL STATISTICS OF WHOLE DISTRICT FROM 1877-10-1909.

				Torvi gistered i er one		istrict	11.	to the district	all belongi	eaths at ages ng trothe trict	
V (a)	to middle of each year	Number	Ratio	Vedi	of age  Rate per 1000 Births	No.	Hages Hate	bath of non-resident	Deaths of belonging to	<b>Σ</b> ο,	15.00
1877 1879 1880 1881 1888 1888 1888 1888 1890 1891 1892 1893 1894 1895 1898 1899 1900 1901 1902 1903 1904 1905 1906	3.200 3.300 3.380 3.470 3.550 3.650 3.850 4.100 4.460 4.750 5.200 5.400 5.550 6.500 7.000 7.800 8.500 9.200 9.700 10.300 10.300 10.300 13.500 15.500 15.500 17.200	124 119 122 105 134 123 156 156 156 157 157 157 157 157 157 157 157 157 157	38·50 36·06 36·09 30·26 37·74 35·34 31·94 38·05 34·08 32·39 31·57 31·20 30·38 28·52 26·61 28·60 22·43 28·21 28	12 14 12 7 14 22 9 17 15 21 24 17 15 30 17 23 20 42 20 50 45 48 35 40 47 41 42	97 117 98 67 104 171 108 125 147 112 96 132 155 196 176 86 138 148 148 148 148 198 198 198 198 198 198 198 198 198 19	56 66 61 52 48 61 54 64 86 77 67 88 88 49 105 80 104 108 114 147 148 147 146 160	17·39 20·00 18·04 15·04 13·52 16·71 14·02 15·60 10·28 16·52 16·30 15·11 15·34 16·15 11·43 13·33 11·29 13·37 11·12 13·20 10·45 12·56 10·24 10·59 10·96 8·84 9·30		58 5 5 12 14 12 12 24		11.65 13.98 10.91 13.00 11.20 11.63 11.74 9.57 10.60
1907 1908 Average for 1899	18.000 18.600	497 47 <sup>6</sup>	27·61 25·59 28·14	48 38	96	182 172 140	10·11 9·24 10·56		17 35	199 207	11·05 11·12
1909	19,600		24.13						) )	104	9.89

Taking the three decades from 1879 we have the following rates:—Birth-rates, 33.86, 26.83, 28.14; infantile mortality, 110, 123, 111: death-rates, 15.63, 14.53, 11.48, the last of which is the corrected rate.

The most notable feature is the marked reduction in the death-rate, which is partly due to a steady influx of comparatively young people into the district, and partly to the improved sanitary conditions of the newly-erected property, and to the various measures taken to remove conditions deleterious to health under the different Public Health Acts and Orders. The effects of these measures will be shown even more in future years, and will be of permanent value in our district as well as in the country generally.

Our birth-rate has on the whole kept up to a good average, though the last two years show a decided fall, and this I believe will be more accentuated as our population becomes more settled, and the influx of young people less.

While the infantile mortality of the last decade is no lower than that of the first, there has been in the last eight years a distinct drop, and it is this year as low as it is likely to be. It indicates that the various measures taken and the instructions given are producing good results already, and is an incentive to continue with them. The systematic teaching of hygiene and the feeding and care of infants in technical schools will be of great value, and when the inspection of school children is taken up in the district, as we may now shortly expect, the mortality and morbidity of the earlier years of life will be greatly lessened.

The vital statistics for the different wards for the past year are shown in the next table.

TABLE III.

	North-west	South-west	North-east	South-east
Population, Estimated	 2,500	3,880	9,450	3,770
Number of Deaths	 23	33	90	48
Death-rate	 9.46	8.66	10.01	12.73
Number of Births	 32	86	266	99
Birth-rate	 13.16	22.57	29.58	26-25
Deaths under 1 year	 3	3	18	10
Infantile Mortality	 93	34	67	101
Zymotic Deaths	 I	2	3	I
Zymotic Death-rate	 0.41	0.52	0.33	0.26

In North-west Ward the buth-rate is low, the other rates about the average im South-west Ward the infantile mortality is very low; in North-cast, while the birth-rate is higher, the infantile mortality is about the average; in South-cast both the death-rate and infantile mortality are higher. The zymotic death-rate is low in all.

The chief figures for the past eight years are shown in the next table for the purpose of comparison.

Laber IV

Vital Statistics of Separate Localities in 1909 and Previous Years.

	\	thewest	Wand		×.,	\.	athers	t Ward			uthese	los W 1				
A a log 3.	or square	Buths Repotent	Deaths at II view	Deathsunder Lyeur	Population estin del le meldie et en li yen	Buths Repotent	Deaths at III Ago	therths under Eyeur	Population estimates to middle of rothysal	Buths Benstered	[tere]is (t.a)] Ages	Deaths maker by or	Expulsition estimated to maddle of each test in verif.	Buth, Repeted	Death-attick Ages	Death-mile I year
1002 21	50		17	2	<sup>2</sup> 15 <sup>()</sup>		35	5	1700		50	16	3200	_	38	1.2
1903-22	00	<b>‡</b> 6	37	6	2680	61	26	-1	5300	186	50	18	3320	100	41	1.2
1004-23	00	50	32	-1	3100	63	27	3	6550	223	7-1	28	3550	112	49	1.2
1905 21	50	10	23	6	3450	60	3.1	7	7450	200	75	20	3450	97	29	S
1000-22	()()	31	2.4	2	3550	7.2	27	5	7000	262	91	2,3	3550	IOI	39	1.2
1907 23	80	11	20	2	3570	69	36	()	8600	273	92	28	3550	111	51	1.2
1908-23	So	13	20	2	3710	68	<u>-</u> ² ¬̈́	ì	8850	284	107	22	3660	81	,5 5	1 1
1909-25	00	32	2,3	.3	388o	86	33	3	0450	266	00	1 S	3770	00	48	10

In North-west Ward there has only been a slight increase in the population in this period; in South-west it is more marked; in North-east it has been doubled; while in South-east the growth has been slow.

In the next table the whole of the deaths belonging to the district are arranged in groups, according to the ages at which they occurred, together with the figures for the eight previous years.

Table of the Ages at which the Deaths occurred, from 1900-10-1909.

TABLE V.

		1000	LOVAT	100		100.4	1005	took	T () () =		
		1900	1901	. 1902	1903	1904	1905	, 1900	1907	- 190c	3 1909
Under 1 year		45	49	35	40	47	41	42	48	43	34
Between 1 and 5 years		8	15	17	ΙΙ	35	22	27	22	27	19
,, 5 ,, 15 ,,		2	5	7	5	5	6	4	8	12	10
" 15 " 25 "		5	4	4	8	9	9	6	3	8	8
,, 25 ,, 65 ,,		39	45	49	50	64	52	59	82	82	57
Over 65 years		19	- 34	28	44	22	28	46	36	35	66
										.[	
Fotals	• •	114	152	140	157	182	158	184	199	207	194

Of those over 65 years, 14 were between 65 and 70 years, 32 between 70 and 80, and 10 over 80 years. They constituted over 28 per cent. of the total deaths, which is the highest percentage recorded, and is an indication of a general increased longevity of life.

The number of deaths under one year was 34, and in comparing this with the 483 births we obtain a rate of mortality during the first year of life of 70 per thousand. This is lower than that of last year (90), and much below the average for the past 10 years of 111, and also of those of the country generally, as shown in Tables I. and H. It is, with one exception, in 1880, the lowest rate recorded for the district. The average for the previous 7 years is 95, and these figures compare favourably with that for the whole period of 32 years given (122), and encourage us to believe that with continued efforts the improvement may be permanent.

Of the total number of deaths they formed 17 per cent. the lowest percentage for the last 10 years, and were equal to a death-rate of 1.72 per thousand of the whole population.

The causes of these 34 deaths are classified and analysed in a concise form in Table VI., and are compared with the figures for the previous 9 years.

Table VII. shows, in more extended detail, the causes and the different periods at which these deaths occurred,

TABLE VI.

CAUSE OF DEATH UNDER ONE YEAR OF AGE, FROM 1900 TO 1909.

CLASS		Name			1900	1901	1902	1903	1904	1905	1906	1907	1908	190
Pulmonary Diseases		Bronchitis and Pneumo	nia		4	-4	4	9	6	7	4	7	4	7
		Membranous Croup .			_	_	_		_		_	I	-	
		Scarlet Fever		• • •	1	_	and residen						_	-
Infections Diseases		Measles					1	I	I		2		-	I
Discuses		Whooping Cough		• • !		1	2	3	4	3	_	2	4	I
		Diarrhœa		• •	3	9	2	1	3	3	2	I	3	
		Tuberculosis		• • '	7	4	3	I	2	3	_	5	2	3
Diet	1	Gastro-enteric Catarrh .		* * 1	8	3	3	6	8	4	3	3	3	I
Diseases		Convulsions	•		4	6	6	.5	4	6	6	2	I	
		Marasmus and Debility.		• •	3	7	6	5	3	4	6	8	9	3
Congenital Diseases	(	Premature Birth		'	1 1	()	6	1	1.2	6	8	10	1.2	8
	1	Congenital Defects .	٠	٠٠,	-	3	3	4	3	1	4	-1	4	5
		Other causes	•		4	3	ī	4	I	4	7	5	1	,5
		Totals			4.5	49	35	.10	47	41	42	48	43	34

TABLE VII.

INFANTILE MORTALITY DURING THE YEAR 1909.

DEATHS FROM STATED CAUSES IN WEEKS AND MONTHS UNDER ONE YEAR OF AGE.

Calsu of Death	Under I Week	3-4 Weeks	Total under I Month	1.2 Months	2 3 Nonths	3 4 Months	5 & Months	7 8 Months	S 9 Months	9 to Months	10 11 Months	11 12 Months	Total Deaths under One Year
1 — Common Infectious Diseases:													
Measles		ĭ	1										I
Whooping Cough												I	ī
2.—Diarrhæal Diseases :													
Gastritis, Gastrointestinal Catarrh	٠.	ī	1			• •		• •				٠.	I
3.—Wasting Diseases:													
Premature Birth	5	1	6	2							٠.		8
Congenital Defects	4		4	I									5
Atrophy, Debility, Marasmus.	I		I		1	٠.		I					3
4.—Tuberculous Diseases:													
Tuberculous Peritonitis Tabes Mesenterica Other Tuberculous Diseases				ī				1					2 I
5.—Other Causes													
Rickets										I			I
Meningitis (not Tuberculous)						I	1						2
Bronchitis		1	ī ·	1			I	I	I				5
Pneumonia		1	1						}			I	2
Suffocation, overlying							1						I
Other causes									1		1		I
										-			
	10	5	15	5	I	1	3	3	I	2	1	2	34

District (or sub-division) of Levenshulme. Population (estimated to middle of 1909), 19,000.

Births in the year (legitimate, 473. Deaths in the year of (legitimate infants, 33. (illegitimate, 10.)

Deaths from all Causes at all Ages .. .. 194.

The number due to Congenital Diseases is, as usual, the largest, 13: Dietetic Diseases caused 4: Infectious Diseases, including Diarrhoea and Tuberculosis, 5: Pulmonary Diseases, 7.

During the first week, 10 deaths occurred; during the first month, 15; during the first three months, 21; and in six months, 25; or taking periods of three months we have the following figures, 21, 4, 4, 5, which indicate the greater dangers and mischances of the first few weeks of life, and the necessity of increased care and proper nutrition at this critical stage of existence.

The deaths during the first week (10) were all really due to premature birth and congenital defects, which caused altogether 13. Atrophy and Debility caused 3 deaths: Gastro-enteric Catarrh, 1; Tubercular Diseases, 3; Whooping Cough, 1; Bronchitis and Pneumonia, 7; 1 death was due to overlying.

During the past three years cards of instructions on the feeding and care of children have been given to the parent when registering a birth, and there is good reason to believe they have had a beneficial effect, and been of assistance to many mothers whose knowledge and experience were limited.

It has not been feasible so far to obtain the practical adoption of the Notification of Births Act in the district, and follow it up with early visiting by a Health Visitor, but during part of the year I was able to arrange for a series of visits by our two Lady Assistant Inspectors, Miss Bible and Miss Barclay, when the return of births registered each month had been received. They visited the houses, made certain inquiries with reference to the child and its surroundings, gave instruction and advice to the mother when required and desirable, and repeated the visits at later dates, in some cases several times.

Altogether 208 houses were visited. At 109 a medical man had attended, at 75 a midwife, at 22 both doctor and midwife. 136 infants were being suckled at the breast; 65 were fed by bottle, of which 53 were boat-shaped without tube, 12 bottles with tubes; 16 had both breast and bottle; a few were fed by spoon.

In 39 cases milk and barley water was given; in 21 some patent food; a few had condensed milk. 136 babies slept in their parents' bed; 68 had separate cots. In only two cases were the conditions of the child with respect to food and clothing and the house described as bad; in these cases several visits were made, and decided improvement recorded as a result. Five infants died while the visits were in progress.

The reports were better and more satisfactory than I had anticipated, and indicated a high standard of nursing and care, and afford evidence of the desire to do all that is possible for the well-being of their children, both in feeding,

clothing, and general conditions. A continuance of these visits and, if possible, at an earlier date, would I am sure be of value, and give even better results and reduce still lower our infantile mortality.

Ten births of illegitimate children were registered, and only one death under one year of age.

The deaths between one and five years number 19, which is lower than last year. The total deaths under five years is 53, the lowest number for the last six years; this is equal to a rate of 2.7 per thousand of the population.

In the next table is shown the chief causes of death of these children, with the figures for the previous nine years,

TABLE VIII.

CAUSES OF DEATH IN CHILDREN UNDER FIVE YEARS OF AGE,
FROM 1900 TO 1909.

Name.	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909
Bronchitis and Pneumonia	 4	6	7	II	12	14	8	12	6	12
Scarlet Fever	 I		I	I					3	
Measles	 I	. 3	2	1	5		9	3	4	2
Whooping Cough	 2	I	6	4	9	6		2	8	2
Diphtheria and Croup	 I				2	2	I	4		I
Diarrhœa	 3	9	2	I	7	3	3	4	6	
Tuberculosis	 9	7	5	5	3	3	2	8	7	7
Gastro-enteric Catarrh	 8	3	5	6	9	5	4	I	I	I
All other causes	 24	35	24	22	35	30	42	36	35	28
Totals	 53	64	52	51	82	63	69	70	70	53
Death-rate per thousand	 4.2	5.3	4·1	3.7	5.1	3.8	4.0	3.8	3.7	2.7

Of the 19 deaths between one and five years, 5 were due to Bronchitis and Pneumonia, I to Diphtheria, I to Measles, I to Whooping Cough, and I to accident; 4 were due to Tuberculous Diseases, which with the 3 under one year make a total of 7 under five years of age, which is a third of all the deaths from tuberculous affections.

There were no deaths from Scarlet Fever nor from Diarrhæa at this period.

In the next table the deaths of persons at all ages are given in a concise form for comparison with previous years.

Table 1X.

Lotal Deaths throughout the District of Persons at all Ages,

erom 1890-10-1909.

Diseases			1899	1900	1001	190.	2 190.	3/190.	1190	5 1 906	5 190;	7 1008	\$ 1900
Smallpox		٠.											
Measles			12		.3	2	2	.5		1.2	1	.]	2
Scarlet Fever			I	2	2	.3	1	1			1	-1	1
Diplitheria				I		2		2	, }	2	6	()	2
Whooping Cough				2	I	()	, ·l	9	6		2	8	2
Enteric Fever an	id C	011-					ı						
tinned Fever				I	2		1			2		I	
Erysipelas			1				1		I				1
Diarrhœa			I ()	-1	9	1 2	2	7	.)	7	4	6	
Puerperal Fever			I			I	I			2	I		
Phthisis & Tuber	culo:	sis.	15	20	15	17	1.4	27	20	14	22	20	22
Brouchitis, Puei	шоі	iia,											
etc			34	11	24	10	33	30	38	26	45	38	42
Heart Disease			9	6	10	10	1,}	11	13	13	15	18	10
Cancer			4	7	7	8	8	12	4	8	ΙΙ	10	17
Alcoholism and C	inh	sis											
of Liver			I	2	.}	I	2	2	I		5	2	2
Injuries			2	3	.3	3	6	3	-1	4	8	6	4
Diseases not class	ified		58	64	83	78	79	73	65	94	75	84	83
									-				
l'otals	٠.		144	118	152	140	157	182	158	184	199	207	194

All the deaths except one were certified by medical men. In 13 deaths inquests were held by coroners; of these 3 were due to accidents, 10 to natural causes.

In the next table the deaths are classified in greater detail, and the age and ward in which they occurred are shown.

The numbers are too small to found any critical observations on, but comparisons may be made with their occurrence in previous years.

The total number of deaths from Respiratory Diseases is 44—Bronchitis 27, Pneumonia 15, Plenrisy 1, other 1—and the pulmonary death-rate is 2·14, which is about the average for the past ten years.

Table X.

Causes of, and Ages at, Death buring Year 1909.

	De	eaths at wh	ether oc	oined ag ourring 1 e Distri	n or bey	tesident: ond	:	belongir	it all age ig to Loc ring in C Dist War	calities, or beyond rict	whether
CAUSES OF DEATH	All Ages	Under	l and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards	North-west	South-west	North-rast	South-east
1	2	3	4	5	6	7	8	9	10	11	12
Measles	2	1	I						1	I	
Scarlet Fever	1			1					1		
Whooping-cough	2	1	1							2	
Diphtheria (including Membranous Croup)	2		1	1			٠	1			1
Epidemic Influenza	2	I					1		2		
Enteritis	I						1		1		
Gastritis	1	1								1	
Erysipelas	I					1				1	
Phthisis (Pulmonary Tuber- culosis)	17	1	1		2	13		2	1	9	5
Other Tuberculous Diseases	5	2	3					1		3	I
Cancer (Malignant Disease)	17					12	5	3	6	3	5
Bronchitis	27	4	2		1	8	12	4	-1	10	9
Pneumonia	15	3	3	1	2	6		2	4	Ü	3
Pleurisy	1					1				I	
Other Diseases of Respiratory Organs	Ĭ					1				1	
Alcoholism-Cirrhosis of Liver.	2					1	1			2	
Premature Birth	8	8	· · ·		••			2		4	2
Heart Diseases	16			2	1	7	6	1	-1	9	2
Accidents	4	1	t	• 1		1		1	1	• •	3
All other Causes	69	I 1	6	4	2	16	30	7	8	37	17
All Causes	194	34	19	10	8	67	56	23	33	90	.18

From Phthisis there were 17 deaths; from other tubercular diseases, 5; making a total of 22. The Phthisis death-rate is 0.86, which is above that of last year and also of the average of the past 10 years of 0.74.

The deaths from Heart Disease (16) are slightly above the average. Those from Cancer (17) are much above, but this may partially be accounted for by the increase in the number of persons living to a more advanced age.

Two deaths were attributed to Influenza, 2 to Circhosis of the Liver, and 4 were due to accidents.

At ages above 5 years there was I death from Scarlet Fever, I from Diphthetia; and I from Erysipelas.

Sixty-nine deaths were due to diseases of various organs which are not here classified.

The total deaths from the 7 principal Zymotic Diseases, viz., Smallpox, Scarlet Fever, Diphtheria, Enteric Fever, Measles, Whooping Cough, and Diarrhosa, were 7, and the zymotic death-rate o-35 per thousand. This is the lowest rate recorded, and is much below the average (1-21) for the past 10 years. They constituted 3-6 per cent, of the total deaths.

In the next table are shown the number of deaths and the rates for the previous 10 years from Zymotic Diseases, Pulmonary Diseases, and Phthisis.

Table XI.

Comparison of the Mortality from Zymotic Diseases from 1897 to 1909.

			. 0						1() 5		1	1008	
						1902	. 1403	190.1		1900	11,07	1908	
Total Deaths from													
Zymotic Diseases	 19	8	24	1 1	17	16	10	24	1.2	20	17	26	7
Zymotic Death-rate	 2'0	-8	2,3	1.0	1.4	1,5	*71	1.2	72	1.10	194	1,30	*35
Pulmonary Diseases	 23	18	.3 2	1 4	2.4	10	33	30	38	26	45	38	42
Pulmonary Death-rate	 2 . 2	1.8	2.0	1.25	2.05	112	2 14	1.03	2:30	1.21	2 144	2.04	2114
							-						
Phthisis Phthisis Death rate	 11	$-\frac{14}{1.4}$	-4 -36	10	· 01	12	. 6 - 14	18	·85	· 10	14	13	17
				·									

During the year there has been an exceptional occurrence of Infectious Disease for our district. Scarlet Fever was very prevalent, Diphtheria to a slight amount, Measles and Whooping Cough to a moderate extent.

One limited and eighty-nine cases of the chief Infectious Diseases were notified, all by medical men, and in the next table these are compared with the figures of previous years.

Table XII.

Cases of Infectious Diseases Notified from 1897 to 1909.

	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909
Smallpox	_	_	_	_			-1	5					
Scarlet Fever	23	18	27	67	101	19	26	34	51	63	43	81	151
Diphtheria and Croup	4	5	2	7	10	11	-1	10	18	17	32	39	23
Enteric and Continued Fever	- 4	4	6	I	5	1	8	3	_	7	3	4	2
Puerperal Fever	3		I	_	_	1	2		I	3	2	2	
Erysipelas	3	5	13	6	10	4	7	, 3	6	2	4	5	13
Totals	37	32	49	81	126	36	51	55	76	92	84	131	189

This is by far the largest number recorded up to the present, though in 1901 the proportion of cases to the population was slightly greater. In both instances Scarlet Fever was present in an epidemic form.

Scarlet Fever accounted for 151 cases; Diphtheria, 23; Enteric Fever, 2; Erysipelas, 13.

These 189 cases occurred in 156 houses. There were 4 deaths from them, a percentage of 2·1.

In the next table are shown the age of occurrence, the distribution of cases, and the numbers removed from each ward.

As usual a large majority of the cases occurred in children between the ages of 1 and 15 years—149; there were none under 1 year; 42 between 1 and 5 years; 79 between 5 and 10; 28 between 10 and 15; over 15 years there were 40.

In proportion to the population of the wards, South-west had the most, North-west the least; the proportion of removals was greatest in North-east, lowest in North-west Ward.

Table XIII.

Cases of Infectious Disease Nothfield during the Year 1909.

	Cas	Cases not iffed in while District						notifii ocality		Number of cases a moved to Hospital from each Locality					
		Vt. Ages - Years			Wards				Wards						
Normana Distasi		l to j	10	0.00		Northwest	South west	No theast	year prov	North-west	Fas Ulli	7.	Courtheast	Total cases removed to Hospita	
Diphtheria (including Men branous Croup)		()	9	2	3	}	,ī	1 [	l		2	1		6	
Erysipelas	, 1,3		2	2	9	1	2	8	2						
Scarlet Fever	. 1,51	33	οō	1,3	0	1 [	40	70	27	2	10	27	8	47	
Enteric Fever					2			i	1						
Totals	. 189	42	107	17	2,3	18	17	03	.3 1	2	1.2	31	S	5.3	

The number removed, 53, is the largest recorded, but the percentage of removals, 28, is lower than last year.

In all cases where it was not possible to isolate satisfactorily at home, and in some for business reasons, removal was carried out. It was found possible to retain the remainder of the cases, 136, at home.

As in previous years, the number of children under 15 years in the house has influenced my decision in doubtful eases, and in 51 cases with two or more susceptibles 27 were removed, a percentage of 53. There was, however, a decided difference in the proportions of the cases of the different diseases. In Scarlet Fever 24 out of 40 such cases were removed, a percentage of 60; in Diphtheria only 3 out of 11, or 27 per cent. These figures only apply to the period before November 8th, when I was responsible, and not to those subsequent to that date.

The small proportion of Diphtheria cases was due to the absence of request for removal from the inedical men attending. In very few cases where request was made for removal was I obliged to decide against it, and in each case the medical attendant was informed of the reasons.

In the next table are given the figures for the last 11 years. This includes the four diseases for which hospital accommodation is provided, viz., Smallpox, Scarlet Fever. Diphtheria, and Enteric Fever. In the future it will be possible to include Puerperal Fever, which will in argent cases be of very great advantage.

TABLE XIV.

CASES REMOVED.

Veau	Cases Notified	Number Removed to Hospital	Percentage Removed
1899	35	13.	.37
1900	75	10	21
1901	116	28	24
1902	31	8	26
1903	42	18	4.3
1904	52	33	63
1905	69	31	45
1906	87	26	30
1907	78	18	23
1908	124	43	34
1909	189	53	28

Forty-nine cases of Scarlet Fever and Diphtheria were removed to Baguley Sanatorium; 4 cases, all of Scarlet Fever, to Hyde Sanatorium. The cases were taken under the care of a Lady Assistant Inspector or one of the staff, and were brought back again from the hospital. Daily reports of the condition of the patients were received and posted up at the offices: in only a few argent cases were visits allowed. One death, of Scarlet Fever, occurred in hospital. There was only one return case, of Diphtheria, which occurred 19 days afterwards. This is due to the great care taken by Dr. Basil Rhodes to secure complete freedom from infection before discharge.

Our hospital accommodation was over-taxed twice during the year for a period in June and September, and we were obliged to avail ourselves of our temporary agreement with Hyde to take our cases on certain terms. We were thereby enabled to remove all really urgent cases.

In each case full inquiries were made immediately after notification with respect to means of isolation, possible source of infection, schools attended, milk supply, and other details, and in two series of cases it was noted that either a particular school or a milk supply were specially implicated.

The usual forms of instruction were left at the houses, disinfectants supplied on request, and disinfection of the rooms and clothing carried out. Altogether 181 premises were furnigated with formaldehyde, or washed with chloride of lime solution, and 3.021 articles of bedding and clothing were disinfected by superheated steam in the disinfector.

When necessary I made personal visits of inquiry, and in a few difficult and doubtful cases met the medical attendant in consultation.

Reports were received from the schools of scholars absent owing to the occurrence of Measles, Whooping Cough, Chickenpox, Mimps, and Ringworm, and forms of precautions were sent to the houses affected. When the numbers were above the average I made special visits of inquiry to the schools and consulted with the head teachers. In many cases children were noticed to be ill at school, sometimes with definite symptoms, and were sent home, but in most cases the nature of the illness was reported by the School Attendance Officer. The periodical inspection of school children which will now be carried out in the district will help, to a certain extent, to discover some of these cases, but it is highly desirable that all teachers should have some knowledge of the early symptoms of the common infectious diseases, and call attention to suspicious cases.

The knowledge possessed by certain of the teachers has at times been of great value, and has helped to reduce the extent of outbreaks in the schools. With increased knowledge and more complete co-operation it may be possible in the future to prevent some of the epidemics of Measles and Whooping Cough which are due to segregation in schools, and avoid the closing of schools and the interference with education which now occurs.

No school was closed for infectious disease during the year.

The prevalence of the various infectious diseases throughout the year is shown in the next table.

Table XV.

Cases of Infectious Diseases notified and communicated each Month.

Scarlet Fever        6       16       12       5       11       25       11       7       11       19       21       4       151         Diphtheria        1       2        2       4       1       1       4       3       1        23         Enteric Fever        1		J. 111.	March	May	June	(in)	.Yuz.	.Yept.	Ort.	X X	Der.	Litt
Enteric Fever	Scarlet Fever	0 10	12 5	1-1	<b>≟</b> 5	1.1	7	1 1	19	21	4	151
Puerperal Fever	Diphtheria	1 2	2	4	Į	1	1	-1	3	1		23
Erysipelas 1 1 1 1 1 3 1 4 13  Measles	Enteric Fever	1									ι	2
Measles	Puerperal Fever											
	Erysipelas	1 (			1	1		1	.3	I	- 20	13
Whooping Cough few tew few few few	Meastes	0	25 31	32	2							96
	Whooping Cough	few	few few	few								few
Diarrhœa few few few	Diarrhea						1ew	few				few
Smallpox	Smallpox											
Phthisis 4 2 4 4 1 4 19	Phthisis	4 2	4	4			I			4		19

This shows that Scarlet Fever was prevalent throughout the year, more especially from May to December, that cases of Diphtheria occurred in small numbers, that there was a slight epidemic of Measles, and that cases of Whooping Congh and Diarrheea were comparatively few.

It is desirable to consider and review certain points with reference to these in more detail.

Smallpox.—The district has been exempt from this disease for the past five years.

Scarlet Fever.—The number of cases, 151, is by far the highest ever recorded for the district. While at no time did it become really epidemic, yet at three periods, in February, June, and October, considerable outbreaks occurred, two in connection with schools, one in connection with a milk supply. The first outbreak occurred in connection with Errwood Road Council Schools, affecting chiefly the infant department. Nine cases in three classes were notified in four days. On inquiry at the school I found that one of the cases had been sick in the school, and was probably the source of infection. Special precautions were advised, disinfectants were used throughout the school, and the children were carefully observed for some time afterwards by the head mistress, Miss Sumner, for any indications.

The second outbreak occurred at the end of May. In the period May 28th to June 7th, 19 cases in 15 houses were notified, and it was noted that they were all associated with one milk supply. On investigation it was found that 16 cases had commenced between May 27th and 29th, 3 cases between June 5th and 7th, a week later. On inquiry at the dairy no source of infection could be

tound amongst the persons employed, nor any disease in the cattle, but from certain information it was considered extremely probable that the infection might arise from the farm outside the district whence part of the milk was supplied, and steps were taken to stop this supply for a short period till this could be definitely ascertained to be correct or not. The report received was negative, and the supply was resumed after three days; but I also received information that during this period, there had been a cases in Manchester and a few cases elsewhere supplied by the same dealers.

Whether owing to the action taken or from some other reason no case with the same milk supply occurred after June 7th. It is satisfactory to state that I received full information and every assistance from all the parties concerned with the milk supply implicated. On a review of the facts, as far as they could be ascertained, it appeared to me that the outbreak was due to some accidental contamination of part of the supply of milk affected at certain dates, but it was not possible to trace or ascertain definitely how or when or where this occurred, whether at the farm or in course of transit or distribution. The outbreak in many features was in accordance with the character of other outbreaks due to a milk supply.

At the end of September there was a series of cases, 17 in number, in which the first cases attended Chapel Street Council Schools, extending over a period of about five weeks, but no definite source of infection could be ascertained.

The districts chiefly affected during the year were South-west and North-east Wards, and the numbers attending at the various schools were:—Errwood Road, 33: Chapel Street, 35; St. Peter's, 2; St. Mark's, 5; St. Andrew's, 2; St. Mary's, 2: other schools, 10: no school, 62. The last group were mostly children too young for school, and many of them were secondary cases,

The type of the disease was mild, only one death being due to it, equal to a rate of 0.6 of the cases notified; this death occurred in hospital after 6 days. During the last 11 years only 16 deaths have occurred in 663 cases notified, a rate of 2.4 per cent. Of the 151 cases, 70 were males, 81 females, and the ages were as follows:—

Ages und	er I	over.	I	2	3	4	5	()	7	8	()	10	: 1	12	13	14	15-25	25-65 years
Cases	0		2	10	1.1	10	15	2.2	13	8	12	7	5	7	5	2	13	9

Grouping these figures we have: Between 1 and 5 years, 33 cases; 5 and 10 years, 70 cases; 10 and 15 years, 26 cases; over 15 years, 22 cases. It may be noted that during the past 9 years there have been only 6 cases under one year of age in a total of 569 notified, a fact which implies either singular immunity, or exceptional care on the part of the parents, or it may be due to the fact that the presence of a baby in the house has always decided us to remove the case at once.

These 151 cases were notified in 121 houses; 99 had single cases, 14 had two cases. 8 had three. Of the secondary cases 21 were notified at the same time; others occurred after intervals of 5, 13, 7, 14, 25, 35, 50, and 90 days.

Owing to the mildness of the type errors in diagnosis occurred in 6 cases, I was doubtful, I was withdrawn, and 4 cases proved to be Rötheln or German Measles, 2 of which cases had been removed to hospital before the diagnosis had been corrected. Three cases were discovered in the stage of desquamation. There is no doubt that a number of mild cases are never detected, and that these constitute the chief source of the ever-recurring outbreaks. On several occasions the circulation of pamphlets describing the chief symptoms has helped to check an outbreak, and I believe such a method of instruction and advice to be very valuable and helpful to parents, who are as a rule willing and anxious to take every care to avoid these infectious diseases.

Forty-three cases were removed to Baguley Sanatorium, 4 to Hyde Sanatorium; single cases from 40 houses, 2 cases from 2, and 3 from 1 house. In the remainder of the houses there were satisfactory means of isolation, and in a few instances cases were retained at home though removal was offered. The table below shows the percentage of removals of cases of Scarlet Fever during the past 12 years.

TABLE XVI.

CASES AND REMOVALS OF SCARLET FEVER.

Year	Number Notified	Number Removed to Hospital	Percentage Removed
1898	18	3	17
1899	27	13	48
1900	67	16	24
1901	101	28	28
1902	19	8	42
1903	26	13	50
1904	34	19	56
1905	51	19	37
1906	63	19	30
1907	43	7	16
1908	81	33	40
1909	151	47	31

The number of removals from each ward is given in Table XIII.

There was one death in hospital after six days. There were no return cases during the year. At the end of the year the district was comparatively free from Scarlet Feyer.

Diphtheria.—The number of cases, 23, is less than those of the previous two years, and at no time was it prevalent to any serious extent; the highest number of cases in any month was 4.—These 23 cases occurred in 20 houses; 17 had single cases, 3 had 2 cases. Of these cases 9 were males, 14 females, and the ages were as follows:—

Ages unde	r1 over	1	2	3	4	5	ō	7	S	9	10	ΙΙ	12	1.3	14	15 25	25 65 years	
1 2500	0	2	1	3	3		0		1	- 2	()	43		1	- 0	1	3	

Gronping these figures we have: Between 1 and 5 years, 9 cases; between 5 and 10 years, 7 cases; 10 to 15 years. 2 cases; over 15 years. 5 cases; showing the greater susceptibility up to 10 years. Amongst children under 1 year there has only been one case in 164 during the past 9 years, and the same observations apply to this as in the case of Scarlet Fever.

North-east Ward had the largest proportion of cases. In 14 cases no school was attended, 2 attended Errwood Road, 1 Chapel Street, 1 St. Peter's, 1 St. Mark's, and 3 other schools. The cases as a rule were mild, and it was difficult to detect the source of infection. In only 2 cases were serious sanitary defects found in the houses affected. Two deaths occurred, a death-rate of 8.6 per cent.; both were at home, after two days in each case.

In 12 cases swabs were taken, in 11 this was not done. Ten were reported positive, 2 negative at first; in one of these a second swab was positive. At the termination of the cases 10 swabs were taken from 7 cases, and the final results declared negative. In 4 other cases of suspicions sore throats swabs were taken, the reports were negative, and the cases were not notified. It is desirable that in all cases of suspicions sore throats swabs should be taken, so that more of the mild cases of Diphtheria may be detected, and it is also of advantage in those with marked clinical symptoms to confirm the diagnosis, and at the termination of the case it should be the rule before the patient is declared free from infection. If this measure were more frequently carried out, it would, I believe, be possible to greatly reduce the incidence of this disease.

The supply of antitoxin and syringe has been greatly appreciated and taken advantage of, in many cases before notification was made. Of those notified 17 had antitoxin, 6 had none; of the 17, 16 recovered 1 died. In one of the two fatal cases no antitoxin had been used. In several cases not notified antitoxin was used as a precautionary measure.

Six cases were removed from 6 houses, a percentage of 26 of those notified. During the past four years there has been only a moderate demand for removal of cases, owing to the confidence in antitoxin and to the possibilities of isolation at home.

The number of cases and removals since 1903, when hospital accommodation was provided for Diphtheria, is shown in the next table.

Table XVII.
Cases of Diphtheria.

Vear	Number Notified	Number Removed to Hospital	Percentage Removed		
1903	4	ı	25		
1904	10	7	70		
1905	18	12	66		
1906	17	3	17		
1907	32	10 ·	31		
1908	39	9	23		
1909	23	6	26		

All the cases were removed to Baguley Sanatorium. The average duration of cases in hospital was 39 days; at home, excluding the fatal cases, 22 days. The difference was due to complications in two of the cases at hospital. There were no deaths in hospital. A second or return case occurred 19 days after a return from hospital.

Enteric Fever.—Only 2 cases were notified, I in January, I in December; both were females, their ages 27 and 30 years; both were isolated at home, and both recovered; in each case examination of the blood was made with a positive result. No serious sanitary defects were found in the houses affected, and the source could not be traced.

During the last 12 years only 44 cases have been notified, with 8 deaths. I have a decided opinion that this comparative exemption is due to the adoption of the water carriage system, and to the continued removal and abolition of the privy middens which existed previously. There is also only a limited sale of shell-fish, both oysters and mussels, in the district.

Erysipelas.—Thirteen cases were notified. There was one death from it. In no case were sanitary defects reported in the houses affected.

Purrperal Feeer. No case was notified during the year.

Diarrhoa,—Only a few cases occurred during the past year, and no deaths were due to it. Handbills describing the means of prevention were distributed in the summer months, and Diarrhoa Mixture was supplied at the Council Offices and the County Police Station for urgent cases. The cold wet summer no doubt checked the multiplication of flies to a great extent, the abolition of privy middens reduced the possibilities of the indirect contamination of food, and the instructions given by cards and pamphlets as to feeding of children and care of food have, I believe, been of value. There is good reason to hope that with a continuance of these measures we shall in the future prevent, or at least greatly reduce, the incidence of this disease, which in many years has unduly raised our infantile mortality.

Measles.—An outbreak occurred during the months of March, April, and May, and I received reports from the schools, chiefly Chapel Street and Errwood Road, of 96 cases.—They were chiefly cases of Rötheln or German Measles, of a mild type, and in many cases the rash simulated that of Scarlet Fever, and led in a few cases to an erroneous diagnosis and notification, with the result that two cases were removed to hospital before the true nature was detected. It was not necessary to close any school for it. Two deaths were due to it, I under one year, I between one and five years of age. Circulars describing the symptoms and means of prevention were sent to the parents.

Whooping Cough.—This disease occurred to a slight extent, especially during the early months of the year. Two deaths were due to it.

Chickenpox.—Only 3 cases were reported during the year.

I also received reports of 9 cases of Mumps, and of a few cases of Ringworm and other skin diseases, of which contagious Impetigo is the most common.

Epidemic Influenza.—A number of cases occurred during the year, but the type was not severe, and only 2 deaths were ascribed to it.

Phthisis.—During the year 17 deaths occurred from it, 14 in the district, 3 in institutions outside. This is equal to a death-rate of 0.86 per thousand, which is the highest rate for the last 5 years, and is above the average (0.74) for the past 10 years. Of these 17 deaths, in 8 cases only was notification made. There were altogether 19 notifications made—11 by private practitioners, 8 by Poor Law Medical Officers under the new Tuberculosis Regulations, and information of 9 removals was given. Nine cases were removed to Withington Union Hospital.

In 13 cases examination of the sputum was made; 7 gave positive 6 negative results; of these 7 were afterwards notified.

The houses of the cases notified were visited, except where a request was made by the medical attendant not to do so; cards of instructions were left and advice given as to disinfection and other precautions; and in case of death the rooms and bedding were disinfected where necessary.

Visits and advice when judiciously given meet with greater acceptance and cause less feelings of alarm, as people get more acquainted with both the dangers of infection and the increased possibility of cure in the early stages.

It is to be hoped that a greater extension of sanatorium treatment will become available, both as a means of education and also of improvement and cure.

The Memorandum of the Local Government Board was considered, and I was able to report that most of the measures recommended were already adopted, and were being carried out in our district.

At the end of the year there were only a few cases of infections disease in the district, and the general health conditions were very satisfactory.

#### SANITARY WORK OF THE YEAR.

A large amount of work has been carried through during the year, and our Sanitary Inspector, Mr. J. E. Lord, has given energetic and systematic attention to all the numerous details which come under the supervision of the Health Department. During part of the time we had the voluntary services of Miss Bible and Miss Barclay, who acted as assistants to the Sanitary Inspector and as Health Visitors, and enabled us to carry out more work, especially with reference to the care and nursing of infants and in inspecting workshops.

A continuous inspection of the district has been made, all complaints have been investigated, nuisances have been promptly dealt with, and steps taken to have them remedied or removed. For these purposes a large number of visits have been made, and in many cases interviews have been held with occupiers and owners, in addition to the usual letters and notices.

The number of nuisances dealt with is 707. In a large proportion of the cases abatement was secured by verbal requests or cautions; in 226 cases preliminary notices and letters were required, and when these were not effective the matter was brought before the Health Committee; in 95 cases legal notices concerning 126 premises were served; and in 4 cases only was it necessary to apply for summonses at the County Police Court before the requisite measures were carried out; in no case was it actually necessary to obtain a magistrate's order.

In all serious or argent cases the matter has been laid before me by the Inspector at my daily visit to the offices, and I have made 110 visits to 152 premises with reference to unisances and cases of infectious disease, in addition to the regular work of supervision.

Reports and returns relating to these matters have been presented to the Health Committee each month by myself and by the Sanitary Inspector,

Seventy-seven complaints were received relating to a large variety of musances of varying degrees of importance. A detailed list of the various matters dealt with is given below, and it is only necessary for me to refer to certain features of the work.

The following table gives the chief particulars of the work done during the past three years:

LIST I. NUSANCES DEALT WITH, ETC.

NEISANCES DEALL WI	Ш,	ric.		
		1907	1908	1909
Nuisances dealt with		702	730	692
Legal notices served		38	57	95
Complaints received		99	83	77
Midden-privies converted into water-closets				
abolished		132	129	67
Houses disinfected after infectious diseases		74	131	181
Articles of bedding, etc., disinfected		1,170	1.692	3,021
Ashpits emptied		3,366	3,133	2,887
Ashbins emptied		155,202	177.902	212,322
Loads of refuse dealt with		4.502	4.310	4,430
Gallons of water used for flushing		502.700	414,600	369,200
Mortar made, in tons		546	583	521
Nuisances Abated du		, ,		
Midden-privies converted into water-close				17
Midden-privies abolished			* * * * 1	50
Waste water-closets converted				15
Ashpits abolished				15
Ashbins repaired or replaced				140
Blocked-up drains and water-closets				120
Yard surfaces repaired				20
Slopstone pipes and sponts repaired				28
Defective water-closets repaired				27
Ashbins provided				86
Dirty houses				6
Bakehouses limewashed				33
Workshops limewashed				7
Other nuisances				143
Total				7/17

The largest proportion were as usual connected with midden-privies, ashpits, and ashbins; blocked-up drains and water-closets also accounted for a large number.

Water Supply. This is provided by the Manchester Corporation. It has been continuous, abundant, and satisfactory, though a few complaints of slight pollution were received. There are only two houses unprovided with a proper supply from the mains, owing to the distance for it to be conveyed.

Streams.—A large portion of these have been culverted in the centre of the district; on the boundaries they are mostly uncovered. They receive the surface water from the land, and also from the roofs, yards and passages, and from the roads, and are thus polluted to a certain extent, but they are free from pollution by sewage or deleterious manufacturers' refuse.

Privies, Ashpits, and Water-closets.—The number of midden-privies in the district has been greatly reduced and the nuisances from these consequently lessened, with results greatly conducive to the well-being and comfort of the inhabitants.

During the year 17 were converted and 50 abolished, the houses in these cases being already provided with water-closets inside. The total number abolished during the past seven years is 883. There still remain 55 for 71 houses and schools.

There are a large number of ashpits in the district, many too near the houses, uncovered and dilapidated, and at times a cause of nuisance; others are at the bottom of long gardens and involve a great amount of labour to empty them. A small number have been removed (15 this year) and ashbins substituted. It is desirable that this should be done with almost all of them. Altogether 86 ashbins have been provided.

At the present time there are in the district 4.436 fresh-water closets, 37 waste-water closets, 6 pail closets, and 55 midden-privies.

Fifteen waste-water closets have been converted to the ordinary form, and no new ones have been constructed.

Twenty-seven water-closets have been found blocked or defective, and have been repaired.

Securage.—The system of sewers covers the whole of the occupied parts of the district and works satisfactorily. The sewers take all the sewage and slop water; the rain and surface water is carried by surface drains into the brooks, except in part of the older property, where it is found to enter the sewers. Many of the yards are so levelled that in very wet weather the rain water flows into the gulleys adjoining the houses and causes flooding of the sewers,

with consequent backing-up into the cellars of certain low-lying areas. To remedy this evil will involve either the re-levelling of the yards or an enlargement of the sewers to carry off this excess.

The condition of the sewers has been satisfactory, and owing to the cold wet weather during the summer months few complaints of smells from the manholes in the roads have been received. To obviate these completely would entail closure of the ventilating grids in the roads and the provision of ventilating shafts by the side of the houses. This has been done in a few small areas with satisfactory results.

Flushing was carried out systematically, and 369,200 gallons of water were used for this purpose during the year.

One hundred and ten drains and sewer branches were found defective or blocked, and were relaid. In 187 cases the smoke test was applied, in 6 cases the water test.

The sewage is treated outside the district at Withington Sewage Works.

Disposal of Refuse.—Removal of house refuse has been carried out regularly and systematically by the Council's workmen. This is all done during the daytime. Ashbins generally are cleared once a week; at shops on Stockport Road twice a week. Ashpits are emptied at somewhat irregular intervals owing to their scattered arrangement, when found to be full or on request of the occupier, and it is highly desirable both in the interests of health and economy that they should be abolished and ashbins provided generally.

2,887 ashpits, and 212,322 ashbins have been emptied during the year, and the refuse, amounting to 4.430 loads, has been destroyed at the Destructor, or to a certain amount deposited on tips at the Printworks and Wyngate House Farms.

521 tons of mortar have been made at the Destructor, and sold to builders.

Smoke Nuisance.—This has occurred to a very slight extent either from works or factory chimneys. Three observations were made and in no case was the time limit of six minutes per hour exceeded. There has been a moderate amount of muisance from the firing of domestic chimneys; 15 cases were reported, and the persons concerned were fined or warned. It is desirable that this muisance should be checked and prevented, and an increased inspection will greatly reduce it.

Complaints were received of smells from gas fumes from certain works, and warnings were given.

Factories and Workshops.—There are 28 factories in the district, 8 fairly large. The provision of separate sanitary conveniences for each sex is satisfactory.

There are 47 workshops in the district, chiefly dressmakers and boot repairers. Sixty-four visits of inspection were made; in 7 cases notices were required for want of cleanliness, in 1 for overcrowding.

Twenty-six outworkers were reported in the district; they were all visited, and the conditions found to be satisfactory.

There are 27 bakehouses in the district, one of which is underground; they have been regularly inspected; in 33 instances notices to limewash were required.

The laundries were inspected periodically. 116 visits were made in respect of the keeping of Shop Hours.

Altogether 207 visits of inspection were made; 8 written notices were served.

Lists of outworkers have been received from and have been forwarded to other districts as required.

The show vans visiting the district have been visited.

There are no offensive trades carried on in the district.

Slaughter Houses.—Three private slaughter-houses exist in the district. They have been regularly inspected, especially while work has been going on, and the condition of the animals systematically observed, especially with reference to the occurrence of Tuberculosis, by the Sanitary Inspector, who has a certificate qualifying him for inspection of meat. The carcase and organs of a pig, weighing 207 lbs., were found to be tuberculous; they were surrendered to the Inspector, and were destroyed in the Destructor after my examination of them.

The premises have been kept in a satisfactory condition.

Sale of Food and Drugs.—Occasional inspections of the meat, fish, and fruit shops and hawkers' carts have been made; they have been kept in a clean condition, and no meat or fruit was seized. In a few cases nuisance was caused by delay in removing the trade refuse, and notices were served.

Fifty-nine samples of food were taken by the County Police, 5 by Mr. Lord, and 14 since November 9th.

The particulars are given in the following return:

Food and Drugs 1d Analysis, 1000.

# RETURN OF SAMPLES PURCHASED IN THE TOWNSHIP OF LEVENSHULME , DURING THE YEAR 1909.

Numb		Re ult -	€ \(\frac{1}{2}\)1+t	18.51	Remarks
1.1 ( )	Nature of Armb	Genuine	\.	lafte ato d	IX C111.4174.5
	By County Police.				
27	Milk	 26		I	Dismissed
7	Margarine	 7			4 6
11	Butter	 ΙΙ			4 6
7	Lard	 7		1	
2	Whiskey	 2			
I	White Pepper	 I			
-1	Cheese	 +			• •
	By Mr. Lord.				
2	Milk	 3 dear			
I	Сойее	 I			
1	Butter	 1			
I	Lard	 I			
	Since November 9th.				
1.4	Milk	 1.2		2	7% added water, deprived of fat, 7%; fine, 2/6 and costs.

Of the total 78 samples, 3 only of milk were reported to be adulterated, and in 2 cases penalties were imposed,

Dairies, Cowsheds, and Milk Shops.—There are 7 cowsheds in the district: they have all within the last few years had structural alterations made, and are fairly satisfactory. There is still some difficulty in securing cleanliness,

especially of the cattle before milking, and the conditions cannot be considered completely satisfactory up to the present with respect to the milk. No means are used to chill the milk properly, even in the hot weather.

In some cases the air-space required, 800 cubic feet per cow, has not been maintained.

A cow was reported by the Inspector to show such severe signs of illness and emaciation that I had it inspected by a veterinary surgeon, who diagnosed it to be suffering from generalised Tuberculosis. The owner agreed to have it destroyed by a knacker and properly disposed of, which was done under the supervision of our Inspector.

Fifty-four milk shops and dairies are on the register. They are kept in a clean and satisfactory condition on the whole, though in a number of cases it has been necessary to cantion the retailers to keep the milk properly covered.

An outbreak of Scarlet Fever occurred in connection with a certain milk supply, and is described in an earlier portion of the report,

No examination of milk has been made with reference to the presence of tubercle.

Poultry-keeping under unsuitable conditions became a nuisance in several instauces, and notices to remove them were served.

There has been no nuisance from the keeping of pigs.

Schools.—The public elementary schools are, with one exception, of modern construction, and the arrangements are well designed. Satisfactory methods of heating, lighting, and ventilation are in use, and proper sanitary arrangements are fitted in all, with water-closets flushed automatically.

They were visited occasionally, and specially when outbreaks of infectious disease occurred.

Medical inspection of school children has remained in abeyance pending the completion of amalgamation, when arrangements will be made for it,

Housing Accommodation.—There is a large variety in the class of houses in the district, and the supply keeps slightly in advance of the demand, though the proportion of empty houses is not high. The greater portion have been built within the last 20 years, many of them under our improved bye-laws, and the arrangements, sanitary and otherwise, are good and the air space around ample.

There are 5 back-to-back houses in the district. There are no common lodging houses.

No action was taken or needed under the Housing of the Working Classes Act.

Notices were served in 6 cases for the dirty condition of the houses, and in a case for overcrowding. Advantage has been taken of the provision of brushes and lime, and a large number of applications were made for them.

In conclusion I must state that it has only been possible to get through the large amount of work accomplished, and to obtain the good results shown, by the energy and perseverance of the staff, the continuous co-operation and assistance of all the officials, and the invariable and generous support of the Health Committee to all the measures taken and proposals made to promote and improve the sanitary conditions of the district and the welfare of its inhabitants.

In this my last Annual Report as Medical Officer of Health I may allow myself to make a brief personal statement. In 1870 my father wrote the first report on the health of the district for the Local Board, though not appointed Medical Officer of Health until 1872, and for over 24 years I have had the privilege and pleasure to serve the district and to do all that in me lay to carry on the work and advance the sanitary welfare of its inhabitants. It is therefore with a feeling of regret that I now cease to take the practical supervision of the sanitary conditions of our district, and for the last time sign my name as Medical Officer of Health.

I remain, Gentlemen, .

Your obedient Servant,

H. E. Edlin,

Medical Officer of Health.

Middlemore House, Levenshuhne, Apríl 20th, 1910.

